

STATE OF NEW HAMPSHIRE

Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6)

RECEIVED

APR 18 2018

NEW HAMPSHIRE DEPARTMENT OF STATE

I. Name of Lobbyist(s)	Debra Vanderbeek, Robe	ert Clegg, Periklis Karou	utas, Leann Moccia, Chris Herr
II. Name of lobbyist's	partnership, firm or co	rporation, if any:	
Logisla	tivo Solutions III C		
	tive Solutions, L.L.C. f partnership, firm or corporation)		
(Name (r partnership, thin or corporation)		
III. Name of Client			Date April 9, 2018
Political Contribution			
-	-	-	oter 664 paid on behalf of the
client/lobbyist and lob	bying firm, indicate the f	ollowing:	
- 4	Committee	s to Clast Haves Dame	
Full name of candidate	/·	e to Elect House Demo	
	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution	250.00	Office Candidate	is Seeking Representative
enter an estimated value	and the word "estimate."		
Full name of candidate	: NH Senate Dem (Last Name)	ocratic Caucus (First Name)	(Middle Name/Initial)
Amount of contribution	250.00	Office Candidate i	s Saaking Senate
Amount of contribution .		Office Candidate 1	s seeking
	contribution on the line abo		ds or services provided, and enter the oution. If the actual cost is not known
Full come Co. 121 c	. Boutin	David	
Full name of candidate	·	(First Name)	(Middle Name/Initial)
	(Last Name)	(First Maille)	(whome rame/fillial)

(If more than three contributions were made, report additi	onal contributions on separate addendum C forms.)
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 a is true and complete to the best of my knowledge.	and hereby swear or affirm that the foregoing information ge and belief.
De Ma	April 9, 2018
(Signature of lobbyist)	(Date)

0 1116 2

STATE OF NEW HAMPSHIRE

I. Name of Lobbyist(s) Debr			
II. Name of lobbyist's part	nership, firm or coi	poration, if any:	
Legislative S	Solutions, L.L.C.		
	ership, firm or corporation)		
III. Name of Client			Date April 9, 2018
_			
Political Contributions For each political contributions	on that is reportable	nursuant to RSA Char	oter 664 paid on behalf of the
client/lobbyist and lobbying			oter 604 paid on behalf of the
	V 2005-01-20		
			
Full name of candidate:	Soucy	Donna	
	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$ 250	.00	Office Candidate i	s Seeking Senate
	1		
		ve for amount of contrib	ution. If the actual cost is not known
actual cost of the in-kind contrenter an estimated value and the	ibution on the line abo	ve for amount of contrib	ution. If the actual cost is not known
enter an estimated value and th	ibution on the line abo	ve for amount of contrib Bette	ution. If the actual cost is not known
enter an estimated value and th	ibution on the line abo		(Middle Name/Initial)
	Lasky (Last Name)	Bette	(Middle Name/Initial)
Full name of candidate: Amount of contribution \$ 250 If the contribution is an in-kino	Lasky (Last Name) .00 d contribution, provide ibution on the line abo	Bette (First Name) Office Candidate is a description of the good ve for amount of contrib	(Middle Name/Initial) s Seeking Senate ds or services provided, and enter the
Full name of candidate: Amount of contribution \$ 250 If the contribution is an in-kind actual cost of the in-kind contrenter an estimated value and the	Lasky (Last Name) .00 d contribution, provide ibution on the line abo	Bette (First Name) Office Candidate is a description of the good ve for amount of contrib	(Middle Name/Initial) s Seeking Senate ds or services provided, and enter the
Full name of candidate: Amount of contribution \$ 250 If the contribution is an in-kind actual cost of the in-kind contr	Lasky (Last Name) .00 d contribution, provide ibution on the line about word "estimate."	Bette (First Name) Office Candidate is a description of the good we for amount of contrib	(Middle Name/Initial)

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter t actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known enter an estimated value and the word "estimate."				
(If more than three contributions were made, report additional contributions)	ributions on separate addendum C forms.)			
Sworn Statement/Affirmation by Lobbyist				
I have read RSA 15, RSA 15-B and RSA 664 and here is true and complete to the best of my knowledge and be	•			
(Signature of lobbyist)	April 9, 2018 (Date)			
Debra Vanderbeek	(= 111)			
(Print Name of lobbyist)				

•

,



STATE OF NEW HAMPSHIRE

Legisiative .	Solutions, L.L.C.			
	ership, firm or corporation)			
III. Name of Client		Date April 9, 2018		
Political Contributions For each political contribut client/lobbyist and lobbying			oter 664 paid on behalf of the	
Full name of candidate:	Gray	Jim		
	(Last Name)	(First Name)	(Middle Name/Initial)	
Amount of contribution \$ 250	0.00	Office Candidate	is Seeking Senate	
Full name of candidate:	Reagan	John		
Full name of candidate:	Reagan (Last Name)	John (First Name)	(Middle Name/Initial)	
Full name of candidate: Amount of contribution \$ 250	(Last Name)		,	
Amount of contribution \$ 250	(Last Name) 0.00 d contribution, provide ribution on the line abo	(First Name) Office Candidate is a description of the good	s Seeking Senate ds or services provided, and enter the	
Amount of contribution \$ 250 If the contribution is an in-kind actual cost of the in-kind contribution is an in-kind contribution in the in-k	(Last Name) 0.00 d contribution, provide ribution on the line about word "estimate."	(First Name) Office Candidate is a description of the good we for amount of contribe	s Seeking Senate ds or services provided, and enter the ution. If the actual cost is not known	
Amount of contribution \$ 250. If the contribution is an in-kind actual cost of the in-kind contrenter an estimated value and the contribution is a contribution of the contribution of th	(Last Name) 0.00 d contribution, provide ribution on the line about word "estimate."	(First Name) Office Candidate is a description of the good we for amount of contrib	s Seeking Senate ds or services provided, and enter the	

If the contribution is an in-kind contribution, provide a description of the actual cost of the in-kind contribution on the line above for amount of coenter an estimated value and the word "estimate."	
(If more than three contributions were made, report additional contributions on	separate addendum C forms.)
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear of is true and complete to the best of my knowledge and belief.	or affirm that the foregoing information
Of Mall	April 9, 2018
(Signature of lobbyist)	(Date)
Debra Vanderbeek	
(Print Name of lobbyist)	

•

0.000

STATE OF NEW HAMPSHIRE

rehin firm or so-			
ramp, min or corp	oration, if any:		
utions, L.L.C.			
ip, firm or corporation)			
that is namentable m	umanamt ta DCA Cham		
		ner 604 paid on benail of the	
in, moreate the for	g.		
NA	s : 1		
		(Middle Name/Initial)	
	,	,	
)	Office Candidate i	s Seeking Senate	
		•	
Woodburn	Jeff		
Woodburn (Last Name)	Jeff (First Name)	(Middle Name/Initial)	
(Last Name)	(First Name)	, , , , , , , , , , , , , , , , , , ,	
		, , , , , , , , , , , , , , , , , , ,	
(Last Name)) ontribution, provide a	(First Name) Office Candidate is description of the good for amount of contributions.	Seeking Senate ds or services provided, and enter the	
(Last Name) Ontribution, provide a action on the line above	(First Name) Office Candidate is description of the good for amount of contributions.	Seeking Senate ds or services provided, and enter the	
(Last Name)) ontribution, provide a ation on the line above word "estimate."	(First Name) Office Candidate is description of the good for amount of contributions.	Seeking Senate ds or services provided, and enter the	
(Last Name) Ontribution, provide a action on the line above	(First Name) Office Candidate is description of the good for amount of contributions.	, , , , , , , , , , , , , , , , , , ,	
	that is reportable p rm, indicate the foll Watters (Last Name) Ontribution, provide a	that is reportable pursuant to RSA Chaprm, indicate the following: Watters David (Last Name) (First Name) Office Candidate in the contribution, provide a description of the good attion on the line above for amount of contribution.	

(If more than three contributions were made, report addition	onal contributions on separate addendum C forms.)
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 ar is true and complete to the best of my knowledge	nd hereby swear or affirm that the foregoing information e and belief.
	April 9, 2018

.



STATE OF NEW HAMPSHIRE

	Solutions, L.L.C.		
(Name of partr	ership, firm or corporation)		
III. Name of Client		Date April 9, 2018	
Political Contributions For each political contribut client/lobbyist and lobbying	ion that is reportable g firm, indicate the fo	pursuant to RSA Chap llowing:	oter 664 paid on behalf of the
Full name of candidate:	Birdsell	Regina	
	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$ 250	0.00	Office Candidate	is Seeking Senate
		·	
	Gannon	William	
			(Middle Name/Initial)
Full name of candidate:	Gannon (Last Name)	William	(Middle Name/Initial)
Full name of candidate: Amount of contribution \$ 250 If the contribution is an in-kine	Gannon (Last Name) 0.00 d contribution, provide ribution on the line above	William (First Name) Office Candidate is a description of the good	(Middle Name/Initial) s Seeking Senate ds or services provided, and enter the
Full name of candidate: Amount of contribution \$ 250 If the contribution is an in-kine actual cost of the in-kind contrenter an estimated value and the	Gannon (Last Name) 0.00 d contribution, provide ribution on the line above word "estimate."	William (First Name) Office Candidate is a description of the good	(Middle Name/Initial)
Full name of candidate: Amount of contribution \$ 250 If the contribution is an in-kind actual cost of the in-kind contribution is an in-kind contribution in-kind contribution is an in-kind contribution in-kind contribution is an in-kind contribution is an in-kind contribution is an in-kind actual cost of the in-kind contribution is an in-kind actual cost of the in-kind contribution is an in-kind actual cost of the in-kind contribution is an in-kind actual cost of the in-kind contribution is an in-kind actual cost of the in-kind contribution is an in-kind actual cost of the in-kind contribution is an in-kind actual cost of the in-kind contribution is an in-kind actual cost of the in-kind contribution is an in-kind actual cost of the in-kind contribution is an in-kind actual cost of the in-kind contribution is an in-kind actual cost of the in-kind contribution is an in-kind actual cost of the in-kind contribution is an in-kind actual cost of the in-kind contribution is an in-kind actual cost of the in-kind contribution is an in-kind actual cost of the in-kind contribution is an in-kind actual cost of the in-kind contribution is an in-kind actual cost of the in-kind contribution is an in-kind actual cost of the i	Gannon (Last Name) 0.00 d contribution, provide ribution on the line above word "estimate."	William (First Name) Office Candidate is a description of the good to go a description of contrib	(Middle Name/Initial) s Seeking Senate ds or services provided, and enter the

If the contribution is an in-kind contribution, provide a description actual cost of the in-kind contribution on the line above for a	
enter an estimated value and the word "estimate."	•
(If more than three contributions were made, report additional contributions)	ributions on separate addendum C forms.)
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and here is true and complete to the best of my knowledge and b	
XXXN (April 9, 2018
(Signature of lobbyist)	(Date)
Debra Vanderbeek	
(Print Name of lobbyist)	

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Name of Lobbying par	tnership, firm, or corpo	oration: Legislative Solutio	ns, L.L.C.
Name of Client (leave	blank if Statement is fo	or the partnership, firm, or	corporation and not related to any
particular client):			
Date of Report (check	one):		
April 25, 2018 💆	July 25, 2018 □	October 31, 2018 □	January 30, 2019 □
			nd Expenses described above, and umber of Addendum forms being
Addendum A(s).		
Addendum B(s).		
Addendum C(s).		
	my knowledge and bel	lief.	nt and each Addendum is true and 9, 2018 (Date)
Robert Clegg			
(Print Name of lobbyis	st)		

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Name of Lobbying partnership, fi	-		
Name of Client (leave blank if St	atement is for the	e partnership, firm, or co	orporation and not related to any
particular client):			
Date of Report (check one):			
April 25, 2018 July 25,	, 2018 🗆 O	October 31, 2018	January 30, 2019 □
I have read RSA 15, RSA 15-B, the following Addendums submitted):			
Addendum A(s).			
Addendum B(s).			
Addendum C(s).			
I hereby swear or affirm that the complete to the best of my knowledge.			
		April 9,	
(Signature of lobbyist)			(Date)
Periklis Karoutas		_	
(Print Name of lobbyist)			

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Name of Lobbying partnership, firm, or corporation: Lob	egislative Solutions, L.L.C.
Name of Client (leave blank if Statement is for the part	nership, firm, or corporation and not related to any
particular client):	
Date of Report (check one):	
April 25, 2018 ☑ July 25, 2018 □ Octobe	er 31, 2018 January 30, 2019
I have read RSA 15, RSA 15-B, RSA 664, the Statem the following Addendums submitted with that Statem submitted):	
Addendum A(s).	
Addendum B(s).	
Addendum C(s).	
I hereby swear or affirm that the foregoing information complete to the best of my knowledge and belief. (Signature of lobbyist)	on the Statement and each Addendum is true and April 9, 2018 (Date)
Leann Moccia	
(Print Name of lobbyist)	

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

		oration: Legislative Solution	ns, L.L.C. corporation and not related to any
particular client):			corporation and not related to any
Date of Report (check o	ne):		
April 25, 2018 🗖	July 25, 2018 □	October 31, 2018 □	January 30, 2019 □
			d Expenses described above, and imber of Addendum forms being
Addendum A(s)	•		
Addendum B(s)			
X Addendum C(s)			
I hereby swear or affirm complete to the best of i			nt and each Addendum is true and
Chital	[hu	April	9, 2018
(Signature of loobyist)			(Date)
Chris Herr			
(Print Name of Johnvist	1		